FEDERAL COMMUNICATIONS COMMISSION Washington, DC 20554

Approved by OMB 3060-0076
Est. time per response: 1 hour

COMMON CARRIER ANNUAL EMPLOYMENT REPORT se read instructions before completing and for Notice regarding public burden.]

SECTION 1 - General Information				III npai acpai.	Liegze read ilizandanis peinte completing and for worde regarding public barden.	ore compleme	g and for twon	i Gumañar an	Subject pointing	-					
1. Name and Mailing Address of Respondent	espondent														
Siskiyou Telephone Company P.O. Box 157 Etna, Ca 96027	ompany												Check ho is a chan address.	Check here if this is a change of address.	
Year Report Filed		3. Reporting	Reporting Period (Ending Date of Pay	ng Date of Pa	V		4. Number of	Number of Full-Time Employees during Selected Reporting Period (check one):	nployees duri	ng Selected					
2017		01/20	01/20/2017	of)			a. Fev	Reporting Penod (check one): a. Fewer than 16 (complete Sections I, IV, and V only) b. 11 16 or more (complete all sections)	one): omplete Sect olete all section	ions I, IV, and	V only)				
SECTION II - Full-Time Employees.	S.														
							Numl Report emplo	Number of Employees (Report employees in only one category)	yees me category)						
Job							F	Race/Ethnicity							
Categories	Hisp	Hispanic or						Not-Hispanic or Latino	c or Latino						Total
		8			Male	le					Female	ale			Columns A - N
	Male	Female	White	Black or African American	Native Hawaiian or Other	Asian	American Indian or Alaska Native	Two or more races	White	Black or African American	Native Hawaiian or Other Pacific	Asian	American Indian or Alaska Native	Two or more races	
	A	В	C	D	Е	П	9	I	-	د	~	г	Z	z	0
Executive/Senior Level Officials and Managers 1.1			1						2						ω
First/Mid-Level Officials and 1.2 Managers			w						1						4
Professionals 2			IJ						IJ						6
Technicians 3			3												3
Sales Workers 4															0
Administrative Support 5 Workers			3						5						80
Craft Workers 6			00												00
Operatives 7															0
Laborers and Helpers 8			1												1
Service Workers 9															0
TOTAL 10	0	0	22	0	0	0	0	0	Ξ	0	0	0	0	0	33
PREVIOUS YEAR TOTAL 11			22						=						33

Title of Person Signing President	05/30/2017	ify that to the best of my k	SECTION V - Certification	This is to advise the Commission that the following complaints alleging violations of the provisions of any equal employment opportunity statute have (Attach a list indicating parties involved, date flied, courts or agencies before which the matter has been heard, file number or other designation, and other designation.	This is to advise the Commission that no complaints regarding violations of the equal employment provisions of Federal, state, territorial, or local statutes have been filed against this company before any body having competent jurisdiction in such matters during the calendar year covered by this report.	SECTION IV - Report of Discrimination Complaints Pursuant to 47 CFR 22.321, 23.55, 90.168, 101.4, and 101.311.	PREVIOUS YEAR TOTAL	TOTAL	Service Workers	Laborers and Helpers	Operatives	Craft Workers	Administrative Support Workers	Sales Workers	Technicians	Professionals	First/Mid-Level Officials and 1	Executive/Senior Level Officials and Managers 1.1				Categories	Job	SECTION III - Part-Time Employees.
	Typed or Printe James T	włedge, infor		Commission ng parties in	Commission body having	ination Con	11	10 0	9	8_	7	6	Ui	4	ω	2	1.2		>	Male		His		ees.
	Lowers	mation, and t		that the follow volved, date fi	that no comp competent ju	nplaints Purs		0											В	Female	Latino	Hispanic or		
	Typed or Printed Name of Person Signing James T Lowers	pelief, all state		wing complair led, courts or	plaints regardi	suant to 47 C		0											C	White				
OF ANY S		ments in this		its alleging vic	ng violations o uch matters d	FR 22.321, 23		0											D	Black or African American				
Y FALSE STA		report are true		dations of the portions which the r	of the equal em uring the caler).55, 90.168, 1		0											m	Hawaiian or Other Pacific Islander				
NSE OR CON	Signature	and correct.		provisions of a natter has bee	nployment pro ndar year cove	01.4, and 101		0											П	Asian	Male			
ADE ON THIS	Eur T-			ny equal emp n heard, file n	visions of Fed ered by this rep	.311.		0											G	American Indian or Alaska Native				Num (Report empl
WILLFULLY FALSE STATEMENTS MADE ON THIS FORM ARE PUNISHABLE BY FINE AND/OR IMPRISONMENT (18 U.S.C. 1001) AND/OR REVOCATION OF ANY STATION LICENSE OR CONSTRUCTION PERMIT (47 U.S.C. 312 (A)(1) AND/OR FORFEITURE (47 U.S.C. 503).	: Locueu			loyment oppor umber or othe	eral, state, ter oort.			0											I	Two or more races		Not-Hispan	Race/Ethnicity	Number of Employees (Report employees in only one category)
	eu			dunity statute or designation	ritorial, or loca			0											-	White		Not-Hispanic or Latino	У	yees one category)
				have been file, and current	al statutes hav			0											L	Black or African American				
				been filed against this company current status or disposition.	⁄e been filed a			0											~	Native Hawaiian or Other Pacific Islander	Female			
	(530) 46		osition.	s company. osition.	gainst this			0											L	Asian	nale			
	530) 467-6168							0											M	American Indian or Alaska Native				
	50							0											z	Two or more races				
EVOCATION							0	0	0	0	0	0	0	0	0	0	0	0	0		Columns A - N	Total		